Case: 24-393, 05/17/2024, DktEntry: 19.2, Page 1 of 11

UNITED STATES COURT OF APPEALS FOR THE SECOND CIRCUIT

Thurgood Marshall U.S. Courthouse 40 Foley Square, New York, NY 10007 Telephone: 212-857-8500

MOTION INFORMATION STATEMENT

Docket Number(s): 24-393	Caption[use short title]			
Motion for: Appoint ment of counse	$\ell/$			
Accompanying in forma pa	upens.			
Set forth below precise, complete statement of relief sought:	The North			
appoint me counsel.	PM 3: 19			
MOVING PARTY:(OPPOSING PARTY:			
Defendant				
Appellant/Petitioner Appellee/Respondent				
MOVING ATTORNEY:	OPPOSING ATTORNEY:			
[name of attorney, with firm, addre				
Court- Judge/ Agency appealed from:	FOR EMERGENCY MOTIONS, MOTIONS FOR STAYS AND			
Has movant notified opposing counsel (required by Local Rule 27.1): Yes No (explain):	INJUCTIONS PENDING APPEAL: Has this request for relief been made below? Has this relief been previously sought in this court? Requested return date and explanation of emergency:			
Opposing counsel's position on motion: Unopposed Opposed Don't Know Does opposing counsel intend to file a response: Yes No Don't Know	Requested return date and explanation of emergency.			
Is the oral argument on motion requested? Yes No (requ	ests for oral argument will not necessarily be granted)			
Has the appeal argument date been set? Yes No If ye	s, enter date:			
Signature of Moving Attorney: Date: 2 2 4 2 02	Service: Electronic Other [Attach proof of service]			
1 /				

Form T-1080 (rev. 10-23)

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TRULINCS 86355053 - PEREVOZNIKOV, ANTON - Unit: DAN-H-A

FROM: 86355053

TO:

SUBJECT: motion meriting counsel DATE: 03/07/2024 06:54:04 PM

Motion meriting counsel.

Docket #: 24-393

Unites States of America v. Rasulov(Perevoznikov)

I am requesting counsel because I have no legal experience to represent me on the judgement of error on the court. I do not have any knowledge in law and how to apply. English is not first language and sometime it is difficult to interpret case law. But me (Mr. Perevoznikov) is in the correct constitutional standing. Case law -"All. For Env"t Renewal, Inc v. Pyramid Crossgates Co., 436F.3d82,87(2d Cir.2006) "and it is up to this Court to establish the constitutional process.

Anton Perevoznikov 86355053 FCI Danbury 33 1/2 Pembroke Rd. Danbury,CT 06811

	DISTRICT COURT			
Court of appeals DISTRIC	the Seemed Gincult.			
Repevoznikov,				
Plaintiff	TEB 2			
United STATES.) Case No. 24-393			
Defendant				
AFFIDAVIT ACCOMPANYING MOTION FOR PERMISSION TO APPEAL IN FORMA PAUPERIS				
TOTAL DESIGNATION OF THE PARTY				
Affidavit in Support of Motion	Instructions			
Affidavit in Support of Motion I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C.	Instructions Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's			

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average monthly amount during the past 12 months		Amount expected next month		
	You	Spouse	You	Spouse	
Employment	\$	\$ 0	\$ 0	\$ 0	
Self-employment	\$ O	\$ •	\$ O	\$ Q	
Income from real property (such as rental income)	\$	\$ 0	\$ 0	\$ 0	
Interest and dividends	\$ 0	\$ 0	\$ 0	\$ 0	
Gifts	\$ 🔿	\$ 0	\$ ()	\$ 0	
Alimony	\$ 0	\$ 0	\$ 0	\$ 🔿	
Child support	\$ 0	\$ 0	\$ 0	\$ 0	
Retirement (such as social security, pensions, annuities, insurance)	\$ 0	\$ 0	\$ 0	\$ 0.	
Disability (such as social security, insurance payments)	\$ 0	\$ O	* O	\$ 0	
Unemployment payments	\$ 0.	\$ O	\$ 0	\$ O	
Public-assistance (such as welfare)	\$ 0	\$ 6	\$	\$.6	
Other (specify):	\$ 0	\$ 0	\$ 6	\$ 6	
Total monthly income:	* O	\$ 0	* O	\$ O	

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
			\$ 0
			\$ 0
			\$ 6

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
			\$ 0
			\$ 0
			\$ 0

4.	How much cash do you and your spouse have? \$
	Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial Institution	Type of Account	Amount you have		Amount your spouse has	
		\$	0	\$	0
		\$	0	\$	0
·		\$	0	\$	0

If you are a prisoner seeking to appeal a judgment in a civil action or proceeding, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Home	Other real estate	Motor vehicle #1
(Value) \$	(Value) \$	(Value) \$ O.
		Make and year:
		Model:
		Registration #:

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Motor vehicle #2	Other assets	Other assets
(Value) \$	(Value) \$	(Value) \$ O
Make and year:		
Model:		
Registration #:		

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse		
	\$	\$. •		
	\$	\$ 0		
	\$	\$ 0		
	\$	\$.		

7. State the persons who rely on you or your spouse for support.

Name [or, if under 18, initials only]	_	Relationship	Age
·	ν / Λ		
	NIK		
·	(

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Your Spouse
Rent or home-mortgage payment (including lot rented for mobile home) Are real estate taxes included?	\$	\$
Is property insurance included? Yes No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ O	\$ 0
Home maintenance (repairs and upkeep)	\$ O	\$ 0
Food	\$ 0	\$ O
Clothing	\$ O	\$ 0
Laundry and dry-cleaning	\$ ()	\$ 0
Medical and dental expenses	\$ O	\$ 0
Transportation (not including motor vehicle payments)	\$ 0	\$ 0
Recreation, entertainment, newspapers, magazines, etc.	\$ 0	\$ 0
Insurance (not deducted from wages or included in mortgage pa	yments) .	
Homeowner's or renter's:	\$ O	\$ 0
Life:	\$ O	\$ 0
Health:	\$ O	\$ <u>0</u>
Motor vehicle:	\$ O	\$ O
Other:	\$ 0	\$ 0
Taxes (not deducted from wages or included in mortgage payments) (specify):	\$ 0	\$ 0
Installment payments		
Motor Vehicle:	\$ 0	\$ O
Credit card (name):	\$ O	\$ O
Department store (name):	\$ O	* O
Other:	\$ 6	\$ 🔿

Alimony, maintenance, and support paid to others	\$ 0	\$ @
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$ 0
Other (specify):	\$ 0	\$ O
Total monthly expenses:	\$ 0	\$ 0

	Total monthly expenses.							
9.	Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?							
	Yes No If yes, describe on an attached sheet.							
10.	Have you spent - or will you be spending - any money for expenses or attorney fees in connection with this lawsuit? Yes No							
	If yes, how much? \$							
11.	Provide any other information that will help explain why you cannot pay the docket fees for your appeal.							
	I don't have any income to pay Fees							
12.	State the city and state of your legal residence							
	FCI Danbusy, CT. Your daytime phone number:							
	Your age: 37 Your years of schooling: College							

Rev. 12.1.2018

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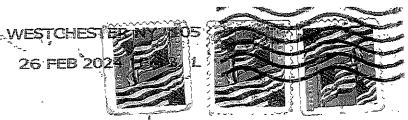
UNITED STATES COURT OF APPEALS FOR THE SECOND CIRCUIT

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	Today's D	ate		_ 		Signature	

Certificate of Service Form (Last Revised 12/2015)

⇔86355-053⇔

Anton Perevoznikov
Reg. No. 86355-053
Federal Correctional Istitution
33 1/2 Pembroke Road
Danbury, CT 06811
United States



to! United Sorres court of Appeals

For the Second Circuit Thurgood Marshall U.S. Court Regard

40 Foley Square, New York Work Street

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Case: 24-393, 05/17/2024, DktEntry: 19.2, Page 11 of 11

⇔86355-053⇔ Anton°⊝ື່ຮັ

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U.S. Court of Appeals For the Second Second District. Circuit

40 Foley Square

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